PTC/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2003 (M.R. 4818).)		1004P60US01	
Application Number 10/600,345		Filed June 23, 2003	
For Edward J. Anthony et al.	· · · · · · · · · · · · · · · · · · ·		
Art Unit 1754		Examiner Ardith	E. Hertzog
This is a request under the provisions of 37 CFR 1.136(a application.) to extend the perio	d for filing a reply in the	e above identified
The requested extension and fee are as follows (check the	me period desired a	nd enter the appropriat	te fee below):
	<u>Fee</u>	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
X Two months (37 CFR 1.17(a)(2))	\$450	\$225	s <u>450.00</u>
Three months (37 CFR 1.17(a)(3))	\$1020	\$ 510	S
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s
Applicant claims small entity status. See 37 CFR 1.2	7 .		
A check in the amount of the fee is enclosed.			j
Payment by credit card. Form PTO-2038 is attac	ched.		
The Director has already been authorized to cha	arge fees in this a	pplication to a Depos	sit Account.
The Director is hereby authorized to charge any Deposit Account Number 16-0600		e required, or credit enclosed a duplicate	
WARNING: Information on this form may become public Provide credit card information and authorization on PT	Credit card informa O-2038.	tion should not be inclu	ided on this form.
f am the applicant/inventor.			RECEIVED
assignee of record of the entire in			CENTRAL FAX CENT
Statement under 37 CFR 3.73	• •	•	DEC 1 4 \$004
attorney or agent or record. Regis		30,000	_
Registration number if acting under 37		· ·	
Stelasturo			14. 2004
Signature		Date (412) 222 5200	
Scephanie Castura Typed or printed name		(613) 232-5300 Telephone Number	
NOTE: Signatures of all the inventors of assignees of record of the entire is	stomet or their represents	•	
signature is required, see below.	maraor Ar mett i chi caciin	wastel and called an ambunt s	THE PERSON IN THE PERSON WITH
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If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.

PAGE 2/2" RCVD AT 12/14/2004 11:11:42 AM [Eastern Standard Time] SVR:USPTO-EFXRF-1/2" DNIS:8729305" CSID:613 563 9231" DURATION (mm-ss):01-08-F--02 ***

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